



PROPERTY and OWNER INFORMATION
(To be completed by owner)

To be completed fully by OWNER

1. ADDRESS of Rental Property: _____

City: _____ State: FL Zip: _____

Parking space/Garage # _____ Mail Box # _____ Unit Phone (if any): _____

Keys and openers and security instructions from Owner to be given to property manager

Security System Code and instructions for entry: _____ Gate Code: _____

Number of keys: For what doors? _____

Remotes: Number of Garage Door openers: _____ Number of Security gate control devises _____

Amenities: Number of Pool/Fitness Access _____ keys or _____ passes or Security code number _____

Number of Other access devises: _____ For what purpose? _____

2. Complete one area only as Primary Owner, Legal Partnership or Corporation. Provide social security number or Tax ID number of primary person or entity who whose name and US Tax ID the income is to be reported to the IRS. Husband and wife select which one is to receive the reported income under their social security US Tax ID. Provide IRS Form W-9 for US Citizens and Resident Aliens [] or IRS Form W-8EIC for Non-Resident Aliens []

INDIVIDUAL: _____ Tax ID _____

LEGAL PARTNERSHIP: Each partner receives separate share and individual Form 1099Misc Income at year end.

% Share [] _____ Tax ID _____

% Share [] _____ Tax ID _____

CORPORATION: _____ Tax ID _____

3. Names of those Persons with authority to approve repairs to the property:

Phone: _____

Phone: _____

4. Mailing Address for Notices and Funds distribution: _____

City: _____ State: _____ Zip: _____

5. Email Address (Required for ACH transfer)s: _____

6. Telephone Information: Home Phone: () _____ Fax: () _____

Primary contact: _____ Business Phone: () _____ Cell: () _____

Alternate contact: _____ Business Phone: () _____ Cell: () _____

7. ACH Authorization attached to Listing [] OR Distribute proceeds by mail only []

8. Status of Mortgage (Select Applicable):

Rental Property has: Mortgage [] OR No Mortgage []

Owner affirms that he/she is current with his/her Mortgage payments YES [] OR

Owner affirms that he is in arrears by _____ months and working with lender to catch up the payments [] OR

Owner is in Foreclosure proceedings currently [] (Broker may refuse to enter into this contract if property is in Foreclosure, and may cancel contract if Foreclosure proceedings are implemented in the future)

9. Lead Paint Disclosure (required if built prior to 1978). Year Built _____

10. **Market Status:** This Property is currently listed for Sale Yes or No

This Property is listed for Sale with _____, Listing Broker

It is understood between the parties that the other sales listing Broker will waive their rights under the listing agreement to any fee for leasing of the property and will provide to Owner a statement of such waiver of their fee rights.

Will Owner be listing property for sale during lease term? Yes or No

If yes, is Lease to include 60 day Notice to Vacate Clause? Yes or No

11. Home Owners or Condo Association Requirements: CHECK ALL THAT APPLY:

- Association has printed Rules and Regulations of Occupancy.
- Association Screening Approval Required for Tenants.
- Association Screening Approval Requires an Interview with Tenants.
- Association Screening Approval Fee Required for Tenants.
- Association requires additional Tenant's Security Deposit to be held by Association for damages to Common grounds.
- Association required lease must be used for all Tenants.
- Association requires additional association specific language be placed in Tenant's lease.

12. Insurance company notified to name International Golf Realty as an additional insured

Insurance Company: _____ Policy Number _____ Phone _____

13: Provide all that apply to the rental property.

Pool Service: _____ Phone: _____
 Lawn Service: _____ Phone: _____
 Service Contract: _____ Phone: _____
 Builder Warranty Contact: _____ Phone: _____
 Security Monitoring Company: _____ Phone: _____
 Pest Control Service: _____ Phone: _____
 Other Service: _____ Phone: _____

14. Utility Companies, and Other Important Names and Phone Contacts

Electric Company: _____ Phone: _____
 Water/ Sewer: _____ Phone: _____
 Trash Service: _____ Phone: _____
 Phone Company: _____ Phone: _____
 Gas: _____ Phone: _____
 Home Owners' Association: _____ Phone: _____
 Owner's Preferred Vendor for: _____ Phone: _____
 Owner's Preferred Vendor for: _____ Phone: _____

15. Unit Features: Owner needs to sign the MLS Listing Form and complete with listing associate.

SF House Townhse Villa Condo Duplex Triplex Quad Manufactured Home Mobil Home

of Bedrooms ____ # of Baths ____ Garage: 1 2 3 4 Carport: 1 2 3 No covered parking

16. RESPONSIBILITIES FOR PAYMENT OF UTILITIES AND SERVICES:

	Tenant	Owner		Tenant	Owner		Tenant	Owner
Electric	<input type="checkbox"/>	<input type="checkbox"/>	Softener Salt	<input type="checkbox"/>	<input type="checkbox"/>	Golf Membership	<input type="checkbox"/>	<input type="checkbox"/>
Water	<input type="checkbox"/>	<input type="checkbox"/>	Pest Control	<input type="checkbox"/>	<input type="checkbox"/>	Tennis Membership	<input type="checkbox"/>	<input type="checkbox"/>
Trash	<input type="checkbox"/>	<input type="checkbox"/>	Basic Cable	<input type="checkbox"/>	<input type="checkbox"/>	Social Membership	<input type="checkbox"/>	<input type="checkbox"/>
Sewer	<input type="checkbox"/>	<input type="checkbox"/>	Lawn Service	<input type="checkbox"/>	<input type="checkbox"/>	HOA Application. Fee	<input type="checkbox"/>	<input type="checkbox"/>
Septic Pumping	<input type="checkbox"/>	<input type="checkbox"/>	Shrub Care	<input type="checkbox"/>	<input type="checkbox"/>	Security System	<input type="checkbox"/>	<input type="checkbox"/>
Gas	<input type="checkbox"/>	<input type="checkbox"/>	Pool Service	<input type="checkbox"/>	<input type="checkbox"/>	Cleaning Charges <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oil	<input type="checkbox"/>	<input type="checkbox"/>	Other _____				<input type="checkbox"/>	<input type="checkbox"/>

17. **PETS:** Negotiable RESTRICTIONS: Number _____ Size _____ Weight _____
(Pet restrictions are often imposed by Condo or Home Owners Association Policy or by Owner preference)

Indicate all pet types considered: dog cat bird fish tank Other _____

Absolutely NO pets will be considered by Owner preference
Absolutely NO pets will be considered by Condo or Home Owners Association Policy

Pet Fee (the standard is \$250 non-refundable) per pet or The Owner prefers a non refundable Pet Fee of \$ _____.

Owner Requests an Additional Pet Deposit (refundable) per pet of \$ _____.

18. **PERSONAL IDENTIFICATION:** Owner must provide legible copy of one. Drivers License(s) Passport(s)

19. **PROOF of OWNERSHIP Provided by Owner (Select One):**
 Public Tax Record HUD Statement Copy of Deed Other _____

20. **OCCUPANCY INFORMATION** Property is: Vacant Owner Occupied Tenant Occupied

Tenant Name: _____ Contact: _____

Tenant Name: _____ Contact: _____

Current Lease Expires _____ / _____ / _____ OR Tenant is month-to-month

Property is is not subject to an existing property management agreement.

Security Deposit is currently held by: _____

If Security deposit is to be transferred to IGR, and IGR is responsible for conducting the final property inspection, it is the Owners responsibility to provide Broker with property walk thru inspection report, pictures, or other documentation showing property condition at time lease began as well as a copy of the existing lease. .

PROPERTY DISCLOSURE

Property Address: _____

Disclosure of all known facts that materially affect the value, use or occupancy of the Property
(If none, please write none)

Owner Signature _____ Date _____

Owner Signature _____ Date _____

Initials _____ / _____